



**TRANSMITTAL  
FORM**

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Application Serial Number	09/666,452
Filing Date	September 21, 2000
First Named Inventor	Kleshinski
Group Art Unit	3731
Examiner Name	Truong, Kevin Thao
Attorney Docket No.	NMT-010CP2
Patent No.	Not applicable
Issue Date	Not applicable

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form (1 pg.)	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input checked="" type="checkbox"/> Amendment/Response (12 pgs.)	<input checked="" type="checkbox"/> Request For Continued Examination (RCE) Transmittal (1 pg.)	<input type="checkbox"/> Status Inquiry
<input checked="" type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
<input checked="" type="checkbox"/> Third Supplemental Information Disclosure Statement (2 pgs.)	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input checked="" type="checkbox"/> Third Supplemental Form PTO-1449 (1 pg.) <input checked="" type="checkbox"/> Copies of IDS Citations (A114-A121; B2-B4; and C11)	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD(s) for large table or computer program	
<input type="checkbox"/> Sequence Listing submission	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

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**SIGNATURE BLOCK**

Respectfully submitted,

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